

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST MONTHLY	Y REPORT	FORM
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To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page 1	of 2	Page(s
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2006 SEP 13 PM 12: 30

SECRETARY OF STATE

			ly in black ink) bottom of page							STAT	EOFIL	MHO	_
Lobbyist's name and permanent business address					D	Date prepared				Period covered			
Joseph Fuller 8923 8th Avenue NE					- 1	September 5, 2006				month ending			
Seattl	e, Washin	gton 87115									(Mo.) 08	(Day)	(Yr.) 2006
Item	Totals	s of all reportab	ole expenditures mad	de or incurre	d by Lobb	yist o	or by	Lobbyist's Emp	loyer on	behalf o	of Lobbyi	st's Empl	oyer.
Category of Expenditure			Proport Item 3,	Proportionate amounts contributed by each employer (Item 3, at bottom of page.)									
D	o Not Have to h	e Reported		Em	Employer No. 1		Employer No. 2		Employer No. 3		o. 3	Employer No. 4	
Enterta Food ar	inment nd Refreshm	ent	s	_ s _		_	\$_		s			S	
Living	Accommodat	tions		_			-						
Adverti	ising			_			_						
Travel				_ _		_	_						
Telepho	one			_									
Other E	Expenses or S	Services											
		Total	\$0.	00 s	(0.00	s _		s			S	
*When	the number of	of employers vo	u are reporting for re	, auires multin	ole L-2 form	ns to	be fil	led a total amoun	t for all	emplove	rs should	be entered	l on Page 1.
Item			ture of more than fif					ther holder of pu	blic offi	ce, and e	executive	officials.	
2	Date		Place		Aı	mount		Names of Legis	lators, Pr	ablic and	Executiv	e Official	s in Group
N/A	Continued on	attached page(s)											
INSTRUCTIONS							3 3	Eı	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code					etion	AstraZeneca Pharmaceuticals, LP No. 1 5301 S. Superstition Mountain Drive, Suite 104, PMB 481 Gold Canyon, Arizona 85218							
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.				of the	No. 2	2							
ТО	BE FILED V	B Secr	en Ysursa etary of State Box 83720			No. 3	3						
Boise, 1D 83720-0080						No.	4						

Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangib personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.								
	Date	Amount	Nan	lame of Legislator, Public or Executive Official Receiving or Benefiting					
Item 5 Subject (from N/A	Subject matter or House Bill, the Lobbyist w	of proposed legislation, the Resolution or other legislat vas supporting or opposing. esolution or Other Approp	number of the Senate tive activity in which		Code S 17 H a in 18 H 19 H 20 In in 21 L c 22 L j in 23 L 25 M 80 26 N f6 a 27 P 28 S in 30 U to	DENTIFICATION			
		le, ratemaking decision, poss, financial services or be apposing.		CERTIFICATION: I hereby certify correct statement in accordance we have a compared to the correct statement of the correct statement in accordance we have a correct statement in accordance we have a correct statement of the correct statement of t	y that the				